CLAIMS A	S FILED - PA (Column 1)		olumn 2)		SMALL EN			OTHER	
OTAL CLAIMS					RATE	FEE		PATE	FEE
OR	NUMBER FILL	ED NU	NUMBER EXTRA		BASIC FEF.	375.00	OP.	5/ SIC FEE	750.0 9
OTAL CHARGEABLE CLAIMS	minus	20= *	*		X\$ 9=	· · · · · · · · ·	OR	X\$18=	
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ULTIPLE DEPENDENT CLAIM P	RESENT				+140=				
f the dਵਿਵਾence in column 1 is	less than zero	, enter "0" i	n column 2		-		OR		*
CLAIMS AS A					TOTAL		OR	OTHER	THAN
(Column 1)		(Column 2)	(Column 3)		SMALL	ENTITY	OR	SMALL	
REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT		RATE	ADDI- TIONAL FEE	 	RATE	ADDI- TIONA FEE
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